

13281  
USPTOUTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	249090US2
First Inventor or Application Identifier	Satosi IMAGO
Title	SERVICE PROVIDING APPARATUS, USER TERMINAL, SERVICE PROVIDING METHOD, SERVICE UTILIZING METHOD, COMPUTER-READABLE RECORDING MEDIUM RECORDED WITH A SERVICE PROVIDING PROGRAM, AND COMPUTER-READABLE RECORDING MEDIUM RECORDED WITH A SERVICE UTILIZING PROGRAM

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
<b>1.</b> <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	<b>7.</b> <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
<b>2.</b> <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="115"/>	<b>8.</b> <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76
<b>3.</b> <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="42"/>	<b>9.</b> <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
<b>4.</b> <input type="checkbox"/> Oath or Declaration Total Pages <input type="text"/>	<b>10.</b> <input type="checkbox"/> English Translation Document (if applicable)
a. <input type="checkbox"/> Newly executed (original or copy)	<b>11.</b> <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	<b>12.</b> <input type="checkbox"/> Preliminary Amendment
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).	<b>13.</b> <input checked="" type="checkbox"/> White Advance Serial No. Postcard
<b>5.</b> <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	<b>14.</b> <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
<b>6.</b> <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	<b>15.</b> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27
a. <input type="checkbox"/> Computer Readable Form (CRF)	<b>16.</b> <input type="checkbox"/> Other:
b. Specification or Sequence Listing on : i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper	
c. <input type="checkbox"/> Statements verifying identity of above copies	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:  
Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

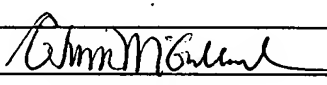
## 18. CORRESPONDENCE ADDRESS

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Registration Number 21,124

22386 U.S. PTO  
10/781739



13281  
USPTO

Packet No. 249090US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Satosi IMAGO

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SERVICE PROVIDING APPARATUS, USER TERMINAL, SERVICE PROVIDING METHOD,  
SERVICE UTILIZING METHOD, COMPUTER-READABLE RECORDING MEDIUM RECORDED  
WITH A SERVICE PROVIDING PROGRAM, AND COMPUTER-READABLE RECORDING MEDIUM  
RECORDED WITH A SERVICE UTILIZING PROGRAM

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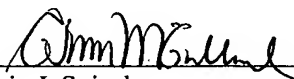
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	49 - 20 =	29	x \$18 =	\$522.00
INDEPENDENT CLAIMS	12 - 3 =	9	x \$86 =	\$774.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$774.00
TOTAL OF ABOVE CALCULATIONS				\$2,196.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$2,196.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of      A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of      to cover the filing fee is enclosed.
- ☒ Credit card payment form is attached to cover the filing fee in the amount of **\$2,196.00**
- ☒ The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date: 2/20/04

  
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